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AMP 0101 PUS Attorney Docket Number DECLARATION FOR UTILITY OR Angela M. Petroskey First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION **Application Number** not assigned (37 CFR 1.63) herewith **Filing Date** Declaration Submitted after Initial Declaration OR Submitted Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
PADDED ATHLETIC TRAINING DEVICE									
(Title of the Invention)									
the specification of which I is attached hereto									
OR as United States Application Number or PCT International									
was filed on (MM/DD/YYYY) (if applicable).									
Application Number and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	py Attached? NO				
	United States		0000	0000	0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Dat		e (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						

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DECLARATION — Utility or Design Patent Application

I Direct all correspondence to:	Customer Nu or Bar Code				OR 🗹	Correspondence address below		
John S. Artz Name								
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor								
Given Name Angela M. (first and middle [if any])			Family Name Petroskey or Surname					
Inventor's IngelaM Petroskey Date Date								
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NAME OF SECOND INVENTOR:			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature						Date		
Residence: City			State		Country	Citizenship		
Mailing Address								
Mailing Address								
State State			ZIP Country					
Additional inventors are being named	f on the	_suppleme	ntal Additio	nal Inven	tor(s) sheet(s) PT	O/SB/02A attached hereto.		